		PART I	B - FEE(S)	TRA	NSMITTAL		
Complete and send this form, together will AUG 2 2 2005		ρplicable fee(s), to: <u>Mail</u> , or <u>Fax</u>			Mail Stop ISSU Commissioner fo P.O. Box 1450 Alexandria, Virg (703) 746-4000	_	
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CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 23911 7590 05/18/2005 -					Note: A certificate of mailing can only be used for domestic mailings of Fee(s) Transmittal. This certificate cannot be used for any other accompany papers. Each additional paper, such as an assignment or formal drawing, m have its own certificate of mailing or transmission.		
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08/23/2005 HDESTA2 00000028 10051331					Joan M. Gordon (Depositor's na		
01 FC:1501		Joan		Signat (Signat			
02 FC:1504 03 FC:8001	300.00 DP 15.00 DP				August 18,	2005	(D
APPLICATION NO.	FILING DATE		FIRST NAME	D INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/051,331	01/15/2002	Philip Y.W. Tsui				155609-0041	7974
TITLE OF INVENTION: TRANSMITTER FOR OPERATING ROLLING CODE RECEIVERS							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PU	BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700			\$300	\$1000	08/18/2005
EXAMINER		ART UNIT		CL	ASS-SUBCLASS		
JENKINS, KIMBERLY YVETTE		2635			340-005260		
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
lease check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 📮 Corporation or other private group entity 📮 Governm							
a. The following fee(s) are enclosed: 4b. Payment of Fee(s):							
Issue Fee A check in the amount of the fee(s) is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached.							
Publication Fee (No small entity discount permitted) Advance Order - # of Copies							
Deposit Account Number 05-1323 (enclose an extra copy of this form). Change in Entity Status (from status indicated above)							
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.							
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Authorized Signature Date August 18, 2005							
Typed or printed name Jonathan M. Lindsay					Registration ?	No. 45,810	

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